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UNITED STATES OF AMERICA COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION				P12171-180		
As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention engitled:						
MANUFACTURE METHOD FOR SEMICONDUCTOR DEVICE WITH SMALL						
WARIATION IN MOS THRESHOLD VOLTAGE the specification of which is attached hereto, unless the following box is checked:						
was filed onas United States patent Application Number or PCT International patent Number and was amended on(if any).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56. I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
Prior Foreign or Provisional Application(s)						
COUNTRY	APPLICATION NUMBER DATE OF					
Japan	Hei 1	1-55341	03/03/	199	YES X NO	
					YESNO	
		•			YESNO	
I hereby claim the benefit under Tide 35. United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Tide 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentiality as defined in Tide 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
UNITED STATES APPLICATION NUMBER	DATE OF FILING			STATUS		
· · · · · · · · · · · · · · · · · · ·	(day, month, year)			(patented, pending, abandoned)		
I hereby appoint OSTROLENK, FABER, GERB & SOFFEN, and the members of the firm, Marvin C. Soffen - Reg. No. 17,542; Samuel H. Weiner - Reg. No. 18,510; Jerome M. Berliner - Reg. No. 18,653; Robert C. Faber - Reg. No. 24,322; Edward A. Meilman - Reg. No. 24,735; Starley H. Lieberstein - Reg. No. 22,400; Steven I. Weisburd - Reg. No. 27,409; Max Moskowitz - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944 and Louis C. Dujmich - Reg. No. 30,625, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence.						
SEND CORRESPONDENCE TO:	·					
I hereby declare that all scatements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Tide 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
FULL NAME OF SOLE OR FIRST INVENTOR		INVENTOR'S SIGNAT	URE O.		DATE	
Takahisa YAMAHA		Jakakus	a Jamah	<u>a</u>	Feb. 28, 2000	
	izuoka T	2525	0	COUNTRY OF		
Hamamatsu-shi, Shizuoka, Japan Japan POST OFFICE ADDRESS C/O YAMAHA CORPORATION						
10-1, Nakazawa-cho, Hamamatsu-shi, Shizuoka, Japan						
FULL NAME OF SECOND JOINT INVENTOR (ANY)	INVENTOR'S SIGNAT	URE		DATE	
RESIDENCE		1		COUNTRY OF	CTTIZENSHIP	
POST OFFICE ADDRESS						
FULL NAME OF THIRD JOINT INVENTOR (IF A	MT)	INVENTOR'S SIGNAT	JRE .		DATE	
RESIDENCE	<u> </u>		COUNTRY OF	CTTIZENSHIP		
POST OFFICE ADDRESS						